WCHA2003AnnualPlan AgencyIdentification

PHAName: WalshCountyHousingAuthority

PHANumber: ND049

PHAFiscalYearBeginning:(mm/yyyy) 01/2004

PHAPlanContactInformation:

Name:ShelleyPopiel,ExecutiveDirector

Phone:701-352-3260

TDD:

Email(ifavailable):wcha@polarcomm.com

PublicAccesstoInformation

Informationregardinganyactivities outlined in this plan can be obtained by contacting: (select all that apply)

X MainadministrativeofficeofthePHA PHAdevelopmentmanagementoffices

DisplayLocationsForPHAPlansandSupportingDocuments

- <u>X</u> MainadministrativeofficeofthePHA PHAdevelopmentmanagementoffices
- <u>X</u> Mainadministrativeofficeofthelocal,countyorStategovernment

Publiclibrary

PHAwebsite

Other(listbelow)

X MainbusinessofficeofthePHA PHAdevelopmentmanagementoffices

Other(listbelow)

PHAProgramsAdministered:

PublicHousingandSection8 XSection8Only PublicHousingOnly

WCHAAnnualPlan FiscalYear2003

[24CFRPart903.7]

i.TableofContents

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DescriptionofPolicyandProgramChangesforth CapitalImprovementNeeds DemolitionandDisposition Homeownership:VoucherHomeownershipPro CrimeandSafety:PHDEPPlan OtherInformation:		3 3 4 5 5 5	
ResidentAdvisoryBoardConsultationProc StatementofConsistencywithConsolidated CriteriaforSubstantialDeviationsandSigni	lPlan	5 6 6	
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 $Attachment \underline{\hspace{0.3cm}}: Public Housing Drug Elimination Program (PHDEP) Plan$

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Attachment D: Comments of Resident Advisory Board or Boards & Explanation

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ii.ExecutiveSummary

[24CFRPart903.79(r)]

With the assistance of the Board of Commissioners, our participants and the administrative staff of the Housing Authority, we have assembled the Housing Authority of Walsh County's Annual Plan. The Planad dresses all of the statutory components as required by the Department of Housing and Urban Development (HUD). In keeping with its mission, the Housing Authority will work towards full utilizing all funds available to the Authority so astomaximize the results in an environment of limited funding. This Planwas as sembled using the most current information available from MTCS (Multifamily Tenant Characteristics System), PIC (Publicand Indian Housing Information Center), the U.S. Census Bureau, CHAS (Comprehensive Housing Affordability Strategy), and North Dakota's Consolidated Planfor Walsh County and does not reflect any changes of availability of funding by HUD.

ThisPlanrequiredthatwetakeadetailedlookattheHousingAuthorityanddetermine whereweare,wherewewanttobeandhowwearegoingtogetthere.Theresultsofthis Authority-wideanalysiswerenotsurprising,aswehaveaddressedmanyofthe componentsinthepast.

Twoconclusionscanbedrawnfromtheresultsoftheanalysis. First, there is an immediate need for safe, affordable elderly and handicapaccessible housing units in Walsh county. Secondly, Walsh County Housing Authority will develop and maintain a networking system throughout the County to assist tenants in identifying services available to meet their needs and provide crime-free and safe housing.

Walsh County Housing will continue to strive to meet the housing needs of county residents by use of the local preferences. A definition of local preferences is as follows:

Elderly, disabled applicants are first priority Families are second priority Singles are third priority

WalshCountyHousingAuthority'sAnnualandFiveYearPlanareconsistentwiththe NorthDakotaConsolidatedPlan.

Lastly, the Housing Authority of Walsh County will continue to down at wedobest; providing safe, affordable housing to low-incomeres idents through the provision of financial assistance programs, supportive services, and effective management.

1.SummaryofPolicyorProgramChangesfortheUpcomingYear

Nochanges.

2. Capital Improvement Needs Not Applicable

A. YesNo:IsthePHAeligibletoparticipateintheCFPinthefiscalyearcoveredby thisPHAPlan?

 $B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$____$

C.YesNo DoesthePHAplantoparticipateintheCapitalFundProgramin theupcomingyear?Ifyes,completetherestofComponent7.Ifno,skiptonext component.

D.CapitalFundProgramGrantSubmissions

The Capital Fund Program 5-Year Action Planis provided as Attachment

(2)CapitalFundProgramAnnualStatement

The Capital Fund Program Annual Statement is provided as Attachment

3.Demolition and Disposition Not Applicable

[24CFRPart903.79(h)]

1.YesNo: DoesthePHAplantoconductanydemolitionordispositionactivities (pursuanttosection18oftheU.S.HousingActof1937(42U.S.C. 1437p))intheplanFiscalYear?(If"No",skiptonextcomponent;if "yes",completeoneactivitydescriptionforeachdevelopment.)

2.ActivityDescription

Demolition/DispositionActivityDescription (NotincludingActivitiesAssociatedwithHOPEVIorConversionActivities)

1a.Developmentname:

1b.Development(project)number:

2.Activitytype:Demolition

Disposition

3. Application status (selectone)

Approved

Submitted, pending approval

Plannedapplication

4. Dateapplicationapproved, submitted, or planned for submission:

(DD/MM/YY)

- 5. Number of units affected:
- 6.Coverageofaction(selectone)

Partofthedevelopment

Totaldevelopment

7. Relocation resources (selectall that apply)

Section8forunits

Publichousing for units

Preferenceforadmission to other public housing or section 8

Other housing for units (describe below)

- 8.Timelineforactivity:
- a. Actualorprojectedstartdateofactivity:b. Actualorprojectedstartdateofrelocationactivities:
- c.Projectedenddateofactivity:

4. Voucher Homeownership Program

[24CFRPart903.79(k)]

A.Yes X No: DoesthePHAplantoadministeraSection8Homeownership programpursuanttoSection8(y)oftheU.S.H.A.of1937,as implementedby24CFRpart982?(If"No",skiptonextcomponent; if"yes",describeeachprogramusingthetablebelow(copyand completequestionsforeachprogramidentified.)

The PHA has demonstrated its capacity to administer the program by (select all that apply):

Establishingaminimumhomeownerdownpaymentrequirementofatleast3percent andrequiringthatatleast1percentofthedownpaymentcomesfromthefamily's resources

Requiringthatfinancingforpurchaseofahomeunderitssection8homeownership willbeprovided,insuredorguaranteedbythestateorFederalgovernment; complywithsecondarymortgagemarketunderwritingrequirements;orcomply withgenerallyacceptedprivatesectorunderwritingstandards

Demonstratingthatithasorwillacquireotherrelevantexperience(listPHA experience,oranyotherorganizationtobeinvolvedanditsexperience,below):

5.SafetyandCrimePrevention:PHDEPPlan NotApplicable [24CFRPart903.7(m)]

YesNo:IsthePHAeligibletoparticipateinthePHDEPinthefiscalyearcoveredby thisPHAPlan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the property of the proper	ıe
upcomingyear?\$	

C.YesNo DoesthePHAplantoparticipateinthePHDEPintheupcoming year?Ifyes,answerquestionD.Ifno,skiptonextcomponent.

D.YesNo:ThePHDEPPlanisattachedatAttachment____

6.OtherInformation

[24CFRPart903.79(r)]

Resident Advisory Board (RAB) Recommendations and PHAR esponse

- 1.Yes <u>X</u>No:DidthePHAreceiveanycommentsonthePHAPlanfromthe ResidentAdvisoryBoard/s?
- 2.Ifyes,thecommentsareAttachedatAttachment(Filename)
- 3.InwhatmannerdidthePHAaddressthosecomments?(selectallthatapply) ThePHAchangedportionsofthePHAPlaninresponsetocomments

Alistofthesechangesisincluded YesNo:belowor YesNo:attheendoftheRABCommentsinAttachment Consideredcomments,butdeterminedthatnochangestothePHAPlanwere necessary.AnexplanationofthePHA'sconsiderationisincludedattheatthe endoftheRABCommentsinAttachment
Other:(listbelow)
B. Statement of Consistency with the Consolidated Plan
$1. Consolidated Planjuris diction: \\ \textbf{2000-2005 Region IV} \\ \textbf{Consolidated Planfor North Dakota Fiscal Years}$
2.ThePHAhastakenthefollowingstepstoensureconsistencyofthisPHAPlanwith theConsolidatedPlanforthejurisdiction:(selectallthatapply) SEEATTACHMENT N
 X ThePHAhasbaseditsstatementofneedsoffamiliesinthejurisdictiononthe needsexpressedintheConsolidatedPlans. ThePHAhasparticipatedinanyconsultationprocessorganizedandofferedby theConsolidatedPlanagencyinthedevelopmentoftheConsolidatedPlan. ThePHAhasconsultedwiththeConsolidatedPlanagencyduringthe developmentofthisPHAPlan. X ActivitiestobeundertakenbythePHAinthecomingyearareconsistentwith specificinitiativescontainedintheConsolidatedPlan.(listsuchinitiatives below) Other:(listbelow)
$\begin{array}{ccc} PHAR equests for support from the Consolidated Plan Agency \\ Yes & \underline{X}\ No: Does the PHA request financial or other support from the State or local \\ & government agency in order to meet the needs of its public housing residents \\ & or inventory? If yes, please list the 5 most important requests below: \\ \end{array}$
4. The Consolidated Planof the jurisdiction supports the PHAP lanwith the following actions and commitments: (describe below)
Walsh County Housing Authority will continue to strive to assist low income families with rental assistance in our jurisdiction.
AmendmentandDeviationDefinitions 24CFRPart903.7(r)
A.SubstantialDeviationfromthe5-yearPlan: None.

B. Significant Amendment or Modification to the Annual Plan:

None.

$\frac{Attachment A}{Supporting Documents Available for Review}$

Applicable		P. L. (IDL
& 0Dil.		RelatedPlan
OnDisplay	SupportingDocument	Component
X	PHAPlanCertificationsofCompliancewiththePHAPlansand	5YearandAnnual
	RelatedRegulations	Plans
		5YearandAnnual
		Plans
X	HousingNeedsStatementoftheConsolidatedPlanforthe	AnnualPlan:
	jurisdiction/sinwhichthePHAislocatedandanyadditional	HousingNeeds
	backupdatatosupportstatementofhousingneedsinthe	
	jurisdiction	4 1D1
X	Mostrecentboard-approvedoperatingbudgetforthepublic	AnnualPlan:
	housingprogram	FinancialResources
		AnnualPlan:
		Eligibility, Selection and Admissions
	 	Policies
		AnnualPlan: Eligibility,Selection
		andAdmissions
		Policies
	 	AnnualPlan:
		Eligibility, Selection
		andAdmissions
		Policies
		AnnualPlan:Rent
		Determination
		AnnualPlan:Rent
		Determination
	Vahaal-haraifinaludadin Saatian & Administrativa Dlan	AnnualPlan:Rent
	\underline{X} checkhereifincludedinSection8AdministrativePlan	Determination
	 	AnnualPlan:
		Operations and
		Maintenance
	 	AnnualPlan:
		Managementand
		Operations
	 	AnnualPlan:
ľ		Operations and

		Maintenanceand
		CommunityServi
		Self-Sufficiency
		AnnualPlan:
		Managementand
<u> </u>		Operations
		AnnualPlan:
		Operationsand
	_	Maintenance
	checkhereifincludedinthepublichousing	AnnualPlan:
<u> </u>	A&OPolicy	GrievanceProced
	\underline{X} checkhereifincludedinSection8AdministrativePlan	AnnualPlan:
		GrievanceProced
	The HUD-approved Capital Fund/Comprehensive Grant Program	AnnualPlan:Capi
	AnnualStatement(HUD52837)foranyactivegrantyear	Needs
	MostrecentCIAPBudget/ProgressReport(HUD52825)forany	AnnualPlan:Capi
	activeCIAPgrants	Needs
	ApprovedHOPEVIapplicationsor,ifmorerecent,approvedor	AnnualPlan:Capi
	submitted HOPEVIR evitalization Plans, or any other approved	Needs
	proposalfordevelopmentofpublichousing	_
	Self-evaluation, Needs Assessment and Transition Planrequired	AnnualPlan:Capi
	byregulationsimplementing \$504oftheRehabilitationActand	Needs
	the Americans with Disabilities Act. See, PIH99-52 (HA).	
	Approvedorsubmittedapplicationsfordemolitionand/or	AnnualPlan:
	dispositionofpublichousing	Demolitionand
		Disposition
		AnnualPlan:
		DesignationofPu
		Housing
		AnnualPlan: ConversionofPul
	1 1 20 1 10 1 10 1 1 10 1 10 1 10 1 10	Housing
	Approvedorsubmittedpublichousinghomeownership	AnnualPlan:
	programs/plans	Homeownership
	PoliciesgoverninganySection8Homeownershipprogram	AnnualPlan:
	(sectionoftheSection8AdministrativePlan)	Homeownersh
X	CooperationagreementbetweenthePHAandtheTANF	AnnualPla
	agencyandbetweenthePHAandlocalemploymentand	CommunityS
	trainingserviceagencies	&Self-Suffic
	FSSActionPlan/sforpublichousingand/orSection8	AnnualPla
		CommunityS
<u> </u>	-	&Self-Suffic
		AnnualPlan:
		CommunitySe
<u> </u>	-	&Self-Sufficie
		AnnualPlan:
		CommunitySe
<u> </u>	-	&Self-Sufficie
		AnnualPlan:S
		andCrime
		Prevention
	PHDEP-relateddocumentation:	AnnualPlan:Safe

Baselinelawenforcementservicesforpublichousing developmentsassistedunderthePHDEPplan; Consortiumagreement/sbetweenthePHAsparticipating intheconsortiumandacopyofthepaymentagreementbetween theconsortiumandHUD(applicableonlytoPHAsparticipating inaconsortiumasspecifiedunder24CFR761.15); Partnershipagreements(indicatingspecificleveraged support)withagencies/organizationsprovidingfunding,services orotherin-kindresourcesforPHDEP-fundedactivities; Coordinationwithotherlawenforcementefforts; Writtenagreement(s)withlocallawenforcement agencies(receivinganyPHDEPfunds);and Allcrimestatisticsandotherrelevantdata(includingPart IandspecifiedPartIIcrimes)thatestablishneedforthepublic housingsitesassistedunderthePHDEPPlan.	andCrimePrevention
	PetPolicy
	AnnualPlan:Annual Audit
TroubledPHAs:MOA/RecoveryPlan	TroubledPHAs
Othersupportingdocuments(optional) (listindividually;useasmanylinesasnecessary)	(specifyasneeded)

WCHA2002AnnualPlanUpdatePage10 **TableLibrary(NotApplicable)**

PHAName:		GrantTypeandNumb
		CapitalFundProgram:
		CapitalFundProgram
		entHousingFactorGrantN
_	_	
PerformanceandEvaluation	nReportforPeriodEnding:Fina	alPerformanceandEv
SummarybyDevelopmentAccount	TotalEstim	atedCost
	Original	Revised
Totalnon-CFPFunds		
1406Operations		
1408ManagementImprovements		
1410Administration		
1411Audit		
1415liquidatedDamages		
1430FeesandCosts		
1440SiteAcquisition		
1450SiteImprovement		
1460DwellingStructures		
	OriginalAnnualStatementReserveforDisasters/En PerformanceandEvaluation SummarybyDevelopmentAccount Totalnon-CFPFunds 1406Operations 1408ManagementImprovements 1410Administration 1411Audit 1415liquidatedDamages 1430FeesandCosts 1440SiteAcquisition 1450SiteImprovement	OriginalAnnualStatementReserveforDisasters/EmergenciesRevisedAnnualStatementReserveforDisasters/EmergenciesRevisedAnnualStatementAccount PerformanceandEvaluationReportforPeriodEnding:Finate SummarybyDevelopmentAccount TotalEstime Original Totalnon-CFPFunds 1406Operations 1408ManagementImprovements 1410Administration 1411Audit 1415liquidatedDamages 1430FeesandCosts 1440SiteAcquisition 1450SiteImprovement

11	1465.1DwellingEquipment—Nonexpendable	
12	1470NondwellingStructures	
13	1475NondwellingEquipment	
14	1485Demolition	
15	1490ReplacementReserve	
16	1492MovingtoWorkDemonstration	
17	1495.1RelocationCosts	
18	1498ModUsedforDevelopment	
19	1502Contingency	
20	AmountofAnnualGrant:(sumoflines2-19)	
21	Amountofline20RelatedtoLBPActivities	
22	Amountofline20RelatedtoSection504Compliance	
23	Amountofline20RelatedtoSecurity	
24	Amountofline20RelatedtoEnergyConservation	
	Measures	

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AnnualStatement/PerformanceandEvaluation CapitalFundProgramandCapitalFundProgramReplacementHousin PartII:SupportingPages

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PHAName:		GrantTypeandNumber CapitalFundProgram#: CapitalFundProgram ReplacementHousingFactor#:		
Development Number	GeneralDescriptionofMajorWork Categories	Dev.AcctNo.	Quantity	TotalEstim
Name/HA-Wide Activities				Original
		1	<u> </u>	
		1	<u> </u>	
!			<u> </u>	
			-	
,		 	1	

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AnnualStatement/PerformanceandEvaluation PartIII:ImplementationSchedule GrantTypeandNumber PHAName: CapitalFundProgram#: CapitalFundProgramReplacementHousingFactor#: DevelopmentNumber AllFundObligated AllFundsExpended Name/HA-Wide (QuartEndingDate) (QuarterEndingDate) Activities Original Revised Actual Original Revised Actual

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CapitalFundProgram5-YearActionPlan NotApplicable

 $Complete one table for each development in which work is planned in the next 5 PHA fiscal years. \\ Complete at able for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.$

CFP5-YearActionPlan			
Originalstatement	Revisedstatement		
Development	DevelopmentName		
Number	(orindicatePHAwide)		
Description of Needed Physical Improvements or Management Estimated Cost			
Improvements			(H

,	1	
1		
	<u> </u>	_
Totalestimatedcostovernext5years	1	

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PHAPublicHousingDrugEliminationProgramPlan Not Applicable

	:GeneralInformation/History	-				
A.AmountofPHDEPGrant\$		_				
		N1	N2			
R						
C.FFYin	C.FFYinwhichfundingisrequested					
D. Execut	${f tive Summary of Annual PHDEP}$	Plan				
E Toward	Amana					
E.Target	Areas					
	PHDEPTargetAreas		Total#ofUnitswithin	TotalPopulationto		
	(Nameofdevelopment(s)orsite)		thePHDEPTarget	beServedwithin		
			Area(s)	thePHDEPTarget		
				Area(s)		
	-					
F.Duration	onofProgram					
	12Months18Months	24Months	<u> </u>			
c PHDI	EPProgramHistory					
G. THDI	El I logi amilistoi y					
	E: IV 6 PVDED		E 15 1			

FiscalYearof Funding	PHDEP Funding Received	Grant#	FundBalanceas ofDateofthis Submission	Grant Extensions orWaivers	GrantStart Date
FY1995					
FY1996					
FY1997					
FY1998					
FY1999					

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Section2:PHDEPPlanGoalsandBudget

A.PHDEPPlanSummary

B. PHDEPBudgetSummary

FFYPHDEPBudgetSummary							
Originalstatement							
Revisedstatementdated:							
BudgetLineItem TotalFundin							
9110-ReimbursementofLawEnforcement							
9115-SpecialInitiative							
9116-GunBuybackTAMatch							
9120-SecurityPersonnel							
9130-EmploymentofInvestigators							
9140-VoluntaryTenantPatrol							
9150-PhysicalImprovements							
9160-DrugPrevention							
9170-DrugIntervention							
9180-DrugTreatment							
9190-OtherProgramCosts							
TOTALPHDEPFUNDING							

PHDEPPlanGoalsandActivities

9110-ReimbursementofLawEnforcement						TotalPHDEPFundin	
Goal(s)							
Objectives				•			
ProposedActivities		#of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE Funding	OtherFundir (Amount/ Source)
1.							
2.							
3.		•					

9115-SpecialInitiative						EPFundir
Goal(s)						
Objectives						
ProposedActivities	#of Persons Served	Target Population	Start Date	Expected Complet Date	PHEDEP Funding	OtherFur (Amount Source)
1.						
2.						
3.						

9116-GunBuybackTA	Match				TotalPH	DEPFunding:\$
Goal(s)						
Objectives						
ProposedActivities	#of Person Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFunding (Amount/Source)
1.						
2.						
3.						
9120-SecurityPersonn	el				TotalPH	DEPFunding:\$
Goal(s)						
Objectives		_				
ProposedActivities	#of Person Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFund (Amount/S
1.						
2.						
3.						
Goal(s) Objectives						
ProposedActivities	#of Person Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFund (Amount/S
1.						
2.						
3.						
WCHA20 9140- VoluntaryTena	002AnnualPlanUpo antPatrol	datePage17			TotalPH	DEPFunding:\$
Goal(s)						
Objectives	ш.с	1 m /	G, ,	I	L DITEDED	OI E
ProposedActivities	#of Person Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFund (Amount/
1.						
2.		1			1	
3.						
9150- PhysicalImprov	zements				TotalPH	DEPFunding:\$
7150- Thysicallinplov	cinents				100011	

arget opulation	Start Date	Expected Complete Date	PHEDEP Funding	OtherFund (Amount/S
	•	-	TotalPH	DEPFundin
	Lac	- I	PUEDED	0.1 7
arget opulation	Start Date	Expected Complete	PHEDEP Funding	OtherF (Amou
оригаціон	Date	Date	runding	/Source
Page18			•	•
			TotalPHI	DEPFunding
			I	
Target Population	Start Date	Expected Complete	PHEDEP Funding	Other (Amo
		Date		
			TotalPHDE	PFunding:\$
Target Population	Start Date	Expected Complete Date	PHEDEP Funding	OtherFundi (Amount/So
		Date		
			TotalPHDE	PFunds:\$
Target	Start	Expected Complete	PHEDEP	OtherFund
	Target	Target Start		Target Start Expected PHEDEP Complete

	Served	Population	Date	Date	Funding	(Amount/S
1.						
2.						
3.						

1.X_YesNo: DoesthePHAgoverningboardincludeatleastonememberwho isdirectlyassistedbythePHAthisyear?(ifno,skipto#2)

Nameofresidentmember(s)onthegoverningboard: KathleenKroulik

Howwastheresidentboardmemberselected:(selectone)?

<u>X</u> Elected(byapprovalofWalshCountyCommissioners) Appointed

C. Thetermofappointmentis(includethedatetermexpires): 2004(3yearterm)

2. A. IfthePHAgoverningboarddoesnothaveatleastonememberwhoisdirectly assistedbythePHA,whynot?

thePHAislocatedinaStatethatrequiresthemembersofa governingboardtobesalariedandserveonafulltimebasis thePHAhaslessthan300publichousingunits,hasprovided reasonablenoticetotheresidentadvisoryboardoftheopportunity toserveonthegoverningboard,andhasnotbeennotifiedbyany residentoftheirinteresttoparticipateintheBoard.

Other(explain):

LilaMielke,Chair TermExpires2006 BennieLangerud,ViceChair TermExpires2004 JamesMosolf TermExpires2006 JudyKeeley TermExpires2005

KathleenKroulik TermExpires2006

${\bf Attachment C:} \\ {\bf Membership of the Resident Advisory Board or Boards}$

ListmembersoftheResidentAdvisoryBoardorBoards:(Ifthelistwouldbe unreasonablylong,listorganizationsrepresentedorotherwiseprovideadescription sufficienttoidentifyhowmembersarechosen.)

ResidentAdvisoryBoardMembers

EleanorClark ElizabethDeSautel SophieKasprick KathleenKroulik GeorgeUnger

Walsh County Housing Authority Board Members

1. JudyKeeley Term:2002-2005

1518775 thSt.NE Grafton,ND58237 701-352-0317

2. KathleenKroulik Term:2003-2006

671BirchCt. Grafton,ND58237 701-352-3386

3. BennieLangerud Term: 1996-2001;2001-2004

2027MyrtleAve. POBox123

Hoople,ND58243 701-894-6120

4. LilaMielke, Chair Term: October 1999-2003

1021McHughAve. Grafton,ND58237 701-352-0547 701-360-3587

5. JamesMosolf Term:2003-2006

POBox173 ParkRiver,ND58270 701-284-6673 EffectiveJune,2003

AttachmentD: RESIDENTADVISORYBOARDMEETINGMINUTES

THURSDAY, AUGUST7, 2003 AT3:30P.M.

Attendance: EleanorClark,ElizabethDeSautel,NellieEstad,Mabel

Johnson, Sophie Kasprick, Kay Kroulik, Myrtle

Thielbar, Iona Thompson, Carol Willits

- 1. PopielreviewedtheminutesfromthelastResidentAdvisoryBoard MeetingwhichwasheldonAugust1,2002.Noquestionsfromthe 2003ResidentAdvisoryBoardregardingtheminutes.
- 1. PopielreviewedtheSection8HousingChoiceVoucherProgram.An explanationofhowtheprogramworks,whoiseligibleforthe program,andthepaymentstandardswereexplained.
- 2. PopielreviewedtheAgencyPlanandthe5YearPlan.
- 3. PopielreviewedtherolesoftheResidentAdvisoryBoardwhichwere providedbyHUD.
- 4. PopielreviewedthegoalsforWalshCountyHousingandprovidedan updatefor2003.
- 5. PopielreviewedthebreakdownofparticipantseffectiveforAugust 2003andthehousingneedsforWalshCounty.
- 6. PopielreviewedtheSEMAPindicatorsandtheHighPerformance ratingfor2002.
- 7. Popielopenedthemeetingforanyquestionsandrecommendations.
- 8. ResidentAdvisoryBoardmembershadnorecommendationsatthis time.Allquestionswereansweredduringthemeeting.

08-07-03

ShelleyPopiel

Date

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260

GRAFTON, ND 58237 600 E. 9TH

ST.

July10,2003

ToParticipantsintheSection8RentalAssistanceProgramatWalshCountyHousing:

ManychangeshaveoccurredintheSection8RentalAssistanceProgramthatyouare currentlyaparticipant.TheQualityHousingandWorkResponsibilityActof1998 (QHWRA),theDepartmentofHousingandUrbanDevelopment(HUD)mandatedeach publichousingagency(PHA)developanAgencyPlan.Throughtheseplan,aPHAwill adviseHUD,itsresidentsandmembersofthepublicofthePHA'smissionforserving theneedsoflow-incomeandverylow-incomefamilies,andthePHA'sstrategyfor addressingtheseneeds.

The planwas developed and submitted to HUD last year with the assistance of a Resident Advisory Board. Also a Public Hearing was held for any public input. The Agency Plan is available in the Walsh County Housing Authority of fice.

The purpose of the Resident Advisory Board is to assist Walsh County Housing and make recommendations regarding the development of the Annual Plan. If you are interested in becoming a member of the Resident Advisory Board, please contact meat 352-3260 or return the bottoms he et to meass oon as possible.

Also,aspartofSection511oftheQHWRA,theBoardofDirectorsofWalshCounty HousingmustconductapublichearingtodiscusstheAnnualPlanandtoinvitepublic commentregardingtheplan.Thepublichearingisscheduledfor August11,2003at 7:00p.m.atParkviewManors .Youarewelcometoattendthepublichearing.

Thankyouforyour time in this matter.	
Sincerely,	
ShelleyPopiel ExecutiveDirector WalshCountyHousingAuthority	
	Yes, Iaminterested in being a member of the

Signature		Telephone
	Number	_

Date

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260

GRAFTON, ND 58237 600 E. 9TH
ST.

FAX: 701-352-9634

RESIDENTADVISORYBOARD

3:30P.M.,AUGUST7,2003

AGENDA

- 1. Reading of last meeting's minutes.
- Review of Housing Choice Voucher Program (Handout).
- 3. Review of Agency Plan.
- 4. Role of Resident Advisory Board Members (Handout).

- 5. 2003 Progress Report (Handout).
- 6. Housing Needs (Handout).
- 7. Open Forum.

AttachmentE:

PUBLICHEARINGMEETINGMINUTES

MONDAY, AUGUST11, 2003 at 7:00 P.M.

Attendance: LilaMielke,JudyKeeley,JamesMosolf, BennieLangerud,KathleenKroulik

- 1. PopielreviewedtheminutesfromthePublicHearingwhichwasheld onAugust5,2002.Noquestionsfromtheattendeesatthe2003 PublicHearingregardingtheminutes.
- 2. PopielreviewedtheSection8HousingChoiceVoucherProgram.An explanationofhowtheprogramworks,whoiseligibleforthe program,andthepaymentstandardswereexplained.
- 3. PopielreviewedtheAgencyPlanandthe5YearPlan.
- 4. PopielreviewedtherolesoftheResidentAdvisoryBoardwhichwere providedbyHUDandprovidedasummaryoftheResidentAdvisory BoardmeetingwhichwasheldonAugust7,2003.
- 5. PopielreviewedthegoalsforWalshCountyHousingandprovidedan updatefor2003.
- 6. PopielreviewedthebreakdownofparticipantseffectiveforAugust 2003andthehousingneedsforWalshCounty.
- 7. PopielreviewedtheSEMAPindicatorsandthe2002scoring.

- 8. Popielopenedthemeetingforanyquestionsandrecommendations.
- 9. TherewerenocommentsorrecommendationsfromthePublic Hearingattendees.

08-11-03	
ShelleyPopiel	Date

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260

GRAFTON, ND 58237 600 E. 9TH

ST.

FAX: 701-352-9634

PUBLIC HEARING

7:00 P.M., AUGUST 11, 2003

AGENDA

- 1. Reading of last meeting's minutes.
- 2. Review of Housing Choice Voucher Program.
- 3. Review of Agency Plan.
- 4. 2003 Progress Report.
- 5. Housing Needs.
- 6. Open Forum.

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260 GRAFTON, ND 58237 600 E. 9TH ST.

FAX

Date: 07-10-2003

To: WalshCountyRecord

From:ShelleyPopiel,ExecutiveDirector WalshCountyHousingAuthority

Fax#: 701-352-1502

Pages: 1includingthissheet

PleaseputthefollowingpublicnoticeinthenexttwoWalshCountyRecords (July16and23):

NOTICEOFHEARING

NoticeisherebygiventhattheHousingAuthorityofWalshCountywill conductaPublicHearingintheMeetingRoomatParkviewManors,600E.9 Street,Grafton,NorthDakota,onAugust11,2003from7:00-7:30p.m.to discusstheproposed2003AnnualPlan.Acopyoftheproposed2004Annual PlanandAgencyPlansubmittedin2003areavailableforreviewandinspection intheWalshCountyHousingAuthorityOfficeat600E.9 thSt.Anyperson interestedmayappearattheHearingandbeheard.

ShelleyPopiel,ExecutiveDirector WalshCountyHousingAuthority

Thankyou.

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AttachmentF: BoardResolution

Sent with Hard Copy to HUD

$\begin{tabular}{ll} Attachment F: \\ Board Resolution Continued \\ Sent with Hard Copy to HUD \end{tabular}$

AttachmentG: AnnualPlan2004Update

MISSIONSTATEMENT:

The Housing Authority of Walsh County strives to provide safe and affordable housing to low-income persons in Walsh County in an environment without discrimination, create opportunities for residents's elf-sufficiency and economic independence.

GOALS:

1. FullyutilizeallSection8ContributionsavailabletothePublicHousingAuthority.

OBJECTIVE:

A. MonitorHousingAssistancePayments(HAP)monthlytoensurethatall anticipatedAnnualContributionsContract(ACC)areutilized.

2003UPDATE

- A. WalshCountyHousingwillreceive\$309,029fromHUDfor2003(ACC). The ExecutiveDirectorwillcontinuetomonitortheHAPamountseachmonthto utilizetheACCmonthlyamountfromHUDtoitsfullextent.
- 2. AttendeducationalsessionsontheSection8RentalAssistanceProgram.

OBJECTIVES:

- 1. The Executive Director will attend 90% of the NAHRO (National Association of Housing and Redevelopment Officials) Round tables held quarterly.
- B. The Executive Director will attend at least I workshop on management of the Section 8 Rental Assistance Program.

2003UPDATE:

- 1. ExecutiveDirectorattendedthefollowingNAHRORoundtablein2003: April16(Aberdeen,SD)andJuly22(Carrington,ND)
- 2. The Executive Director attended the following convention: North Dakota/South Dakota Annual meeting in Aberdeen, South Dakota on April 14-16, 2003.
- 3. Conducted quality filereview and quality in spections at Pembina County Housing Authority in Cavalier, ND.
- 4. AttendedNorthDakotaAffordableHousingCoalition9 thAnnual ConferenceatFargo,NDonSeptember17-18,2003.
- 3. Networkwithcounty-wideagenciestokeepabreastofservicesavailableto low-incomepersons.

OBJECTIVES:

- 1. The Executive Director will attend 90% of the Walsh County Network Coalition meetings that are held the 3rd Wednesday of each month except June and July.
- 2. WorkwithagenciesinWalshCountytomeettheneedsoflowincome

families.

AttachmentG: AnnualPlan2004UpdateContinued

2003UPDATE:

1. ExecutiveDirectorattendedthefollowingWalshCountyNetwork Coalition:

Jan.15-Attended.

Feb.19-Attended.

March19-Attended.

April16-AttendedND/SDNAHROMeetinginAberdeen,SD

May21-Attended.

NomeetingsforJuneandJuly.

Aug.20-Attending.

Sept.17-Attending.

Oct.15-Attending.

Nov.19-Attending.

Dec.17-Attending.

- 2. Appliedandreceived2grantsthroughRegionIVChildren'sServices CoordinatingCommitteeandtheWalshCountyNetworkCoalitiontofunddrug educationinGrafton.TheKidsandKopsandCounteractprogramsare sponsoredbytheGraftonPoliceDepartmenttoeducatechildreninGrafton aboutdrugandtobaccoprevention.
- 3. Participated with Friendship, Inc. in a brain storming session on July 16 on relocating persons with disabilities from group homestoa partments or houses.
- 4. ParticipatedinameetingonAugust7 thatWalshCountySocialServices toworkonmorecollaborativeeffortstoservelowincomefamilies.
- 5. Treasurer of Red River Regional Community Housing & Development Organizations in ce 1998.

4. Developandsupportsafeandcrime-freehousing.

OBJECTIVES:

- 1. Workwithlandlordsandresidentsfortheirsupportandinput.
- 2. Developapartnershipwithlocallawenforcementagenciestopromotesafe, crime-freehousing.

2003UPDATE:

- 1. ExecutiveDirectordevelopedaquarterlynewsletterwhichwillsentto landlordstoupdatethemoncurrentpoliciesandchangesfromHUD.
- 2. ExecutiveDirectorcanconductcriminalbackgroundchecksatthe WalshCountyClerkofDistrictCourt'soffice.AlsoaFBInumberhasbeen receivedwhichallowsforfingerprintingtobedoneandbackgroundchecks conductedthroughtheFBI.

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compliance with all applicable civil rights requirements and that the Housing Authority will affirmatively further fairhousing.

AttachmentH: OrganizationalChart SentwithHardCopytoHUD

AttachmentI:

HousingNeeds SentwithHardCopytoHUD

UponreviewingthedataavailablethroughMTCS(MultifamilyTenantCharacteristics Systems),PIC(PublicandIndianHousingInformationCenter),theU.S.CensusBureau, CHAS(ComprehensiveHousingAffordabilityStrategy),andNorthDakota's ConsolidatedPlanforWalshCounty,WalshCountyHousingwillcontinuetostriveto meetthehousingneedsofcountyresidentsbyuseofthelocalpreferences.Adefinition oflocalpreferencesisasfollows:

Elderly, disabled applicants are first priority Families are second priority Singles are third priority

If there are no elderly or disable dapplicants, then the next name on the family waiting list will be offered avoucher. If there are no elderly, disabled, or family applicants, then the next name on the one person household waiting list will be offered avoucher. When an elderly or disable dapplication is received, they automatically go the top of the waiting list overfamilies and singles. When a family applies for housing assistance, they will be offered avoucher before a single household.

When the waiting list gets very low, articles will be run in the Walsh County Record informing the public of the Section 8 Rental Assistance Program. A radio adwith KXPO Radio Station will also be run.

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260

GRAFTON, ND 58237 600 E. 9TH

ST.

RENTALASSISTANCEPROGRAM SECTION8EXISTINGHOUSING

WHATISTHERENTALASSISTANCEPROGRAM?

It is the mission of the Housing Authority of Walsh County to strive to provide safe, affordable housing to low-income persons in Walsh County in an environment without discrimination, create opportunities for residents' self-sufficiency and economic independence.

The Section 8 tenant-based program is designed to increase the housing choices available to very low-incomehouseholdsbymakingprivatelyownedrentalhousingaffordabletothem. Themain wavitaccomplishesthisisbyprovidingfundingtolocalpublichousingagencies(WalshCounty Housing)sothattheymayproviderentalvoucherstoqualifiedverylow-incomehouseholds. Newrentalassistancewillbeprovidedentirelybyvouchers. Theserentalyouchersproviderent subsidiesthatgenerallyequalthedifferencebetween 30% of the household's adjusted income and the Walsh County Housing-approved payments tandard. Under the Housing Choice Voucher Programafamilymayselectamoreexpensiveunit, with a grossrent that exceeds the Walsh CountyHousing'spaymentstandard,butthefamilymustpaytheadditionalamount.Thelaw restricts avoucher-holder, however, from renting a unit that would initially require the family to paymorethan40% of the family's adjusted you cherforrent. The subsidies are paid directly to thelandlordbyWalshCountyHousing.Section8rentalvoucherfundingisusedfor tenant-basedassistance. Tenant-basedassistance can be provided for any eligiblerentalunit, as longasthelandlordagreestoparticipateintheprogram.AllSection8voucherunitsmustbe inspected by Walsh County Housing to ensure their compliance with HUDhousing quality standards.

WHOISELIGIBLEFORTHEPROGRAM?

The program will assist participants without regard to race, color, national origin, religion, creed, sex, age, or handicap. Grossfamily income cannot exceed the following limits:

FamilySize: 1person		IncomeLimit:
	\$17,050	Effective03-01-03
2persons	\$19,500	
3persons	\$21,900	
4persons	\$24,350	
5persons	\$26,300	
6persons	\$28,250	
7persons	\$30,200	
8persons	\$32,150	

Income includes all monies that a family receives from any source. When a family 's total assets exceed \$5,000, the WCHA will determine the greater of 10% of the total assets or actual interest income earned and additto the gross income to determine eligibility.

Incases of child custody, the family member must have at least 50% physical custody of the

childrenandprovidedocumentationtoverifythecustody. Verificationofpregnancyand disabilityarealsorequired.

WHATSIZEUNITAMIELIGIBLEFOR?

TheunitsizewillbedeterminedbytheWCHA,dependingonthesex,age,andnumber of personsinthehousehold.Afamilyisallowedtorentasmallerorlargerunitundercertain conditions.

WHATTYPEOFHOUSINGWILLQUALIFY?

Rental assistance can be used in any type of privately owned rental housing in Walsh County-houses, duplexes, apartments, and mobile homes. The dwelling unit selected by the family must be in spected in accordance with the Housing Quality Standards (HQS) and be certified as decent, safe, and rentre a sonable by the WCHA.

WAITINGLIST

Awaitinglistisestablishedaccordingtolocalpreferenceanddateofapplication. Elderly and disabled applicants have preference overfamilies. Families have preference oversingle applicants.

WHATARETHEMAXIMUMRENTSALLOWEDFORTHEPROGRAM?

Under this program, total housing costs (rent and ten ant paid utilities) cannot exceed the following payments tandards asset by the U.S. Department of Housing and Urban Development.

BedroomSize:	EffectiveOct.2002	EffectiveOct.2003
	0bedroom	\$329
	\$333	
	1bedroom	\$350
	\$354	
	2bedrooms	\$435
	\$440	
	3bedrooms	\$545
	\$551	
	4bedrooms	\$610
	\$617	
	5bedrooms	\$702
	\$710	
	6bedrooms	\$794
	\$803	

If the tenant is responsible for any or all of the utilities, an amount specified by the WCHA from a utility allowances chedule must be added to the rent to determine if it is within the payment standard limits.

HOWMUCHRENTDOPROGRAMPARTICIPANTSPAY?

The gross family contribution (GFC) is the amount of rent the client pays toward the housing costs. GFC is figured at 30% of the monthly income after allowances for minor children and child cared ue to employment. In the case of elderly or disable dindividuals, medical expenses in excess of 3% of the gross family income are allowable deductions.

HOWDOESTHEPROGRAMWORK?

- 1. The family completes an application with the WCHA. If the family is determined to be eligible, the family is placed on the appropriate waiting list.
- 2. Whenassistancebecomesavailable,thefamilyisnotifiedbymailandanintake appointmentisscheduled.
- 3. Aftertheeligibilityandincomecertificationiscompleted, avoucherisissued and the family begins a housing search.
- 4. Thefamilysignsarequestforleaseapprovalwithlandlord.
- 5. The WCHA inspects the unit.
- 6. If the unit passes the HQS in spection, is within fairmark etrent limits and is determined to be rentre a sonable, the tenant and landlord enterinto a WCHA approved lease.
- 7. Annuallythefamilyisreviewedforcontinuedeligibilityandtheunitisreinspected.

Revised

WALSH COUNTY HOUSING AUTHORITY

PHONE: 701-352-3260 GRAFTON, ND 58237 600 E. 9TH ST.

96PARTICIPANTS

ASOFAUGUST1,2003

FamilialStatus:

	Families Elderly	28	35 29%	37%
	Disabled		27	28%
Single		6	6%	

BedroomSize:

	1Bedroom	36	38%
	2Bedrooms	34	37%
	3Bedrooms	23	24%
	4Bedrooms	2	2%
5Bedroom	1 1%		

Race:

White	95 99%		
	NativeAmerican	1	1%

Ethnicity:

NonHispanic	90	94%
Hispanic	6	7%

City:

	Eamburg			1	1	%
	Grafton			76	,	79%
GrandForks(Pe	orted) 1	1%				
	Hoople	5	5	5%		
Minto		1	1	%		
	ParkRiver			12	1	3%

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SECTION8VOUCHERPROGRAM PAYMENTSTANDARD EFFECTIVEOCTOBER1,2002

BEDROOMSIZE	RENT(INCLUDESUTILITIES)
0	\$329
1	\$350
2	\$435
3	\$545
4	\$610
5	\$702
6	\$794

SECTION8VOUCHERPROGRAM PAYMENTSTANDARD EFFECTIVEOCTOBER1,2003

BEDROOMSIZE	RENT(INCLUDESUTILITIES)
0	\$333
1	\$354
2	\$440
3	\$551
4	\$617
5	\$710
6	\$803

AttachmentJ: CivilRightsCertification SentwithHardCopytoHUD

The Walsh County Housing Authority does here by agree and certify that it will carry out this Annual Planin compliance with all applicable civil rights requirements and will affirmatively further fairhousing. In particular, we will comply with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 502 of the Rehabilitation Act of 1973, and title II of the American swith Disabilities Act of 1990.

ExecutiveDirector	

AttachmentK: CertificationforaDrug-FreeWorkplace SentwithHardCopytoHUD

$\label{lem:attachmentL:} AttachmentL: \\ Certification of Payment to Influence Federal Transactions \\ Sent with Hard Copyto HUD$

AttachmentM: DisclosureofLobbyingActivities SentwithHardCopytoHUD

AttachmentN:
CertificationbyStateorLocalOfficial
ofPHAPlansConsistencywiththeConsolidatedPlan
SentwithHardCopytoHUD